County of Los Angeles - Department of Mental Health Office of Administrative Operations - Quality, Outcomes, and Training Division

# **Summary Report: Annual Test Calls Study**

Report Date: November 30, 2020 Study Period: March 1, 2019, to October 31, 2019



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#### **ACCESS Center Overview**

In Los Angeles (LA) County, the ACCESS Center operates the statewide toll-free telephone number (1-800-854-7771) for both emergency and non-emergency calls, 24 hours a day and seven days a week (24/7). ACCESS Center services include but are not limited to: the deployment of crisis evaluation teams, information and referrals for specialty mental health services (SMHS), gatekeeping of acute inpatient psychiatric beds, after-hours Department of Mental Health's (DMH) point of contact for Patient's Rights and special/critical incident reporting, and telephone interpreter services for language assistance in a preferred language. The ACCESS Center's 24/7 hotline often serves as a caller's first point of contact with DMH.

The ACCESS Center strives to meet LA County's residents' cultural and linguistic needs by providing language assistance services in threshold and non-threshold languages. Callers request information related to SMHS and other social needs. The ACCESS Center provides referrals to providers and services conveniently located and appropriate to their cultural and behavioral health needs. The ACCESS Center responds to various requests from culturally diverse callers with unique requirements for assistance.

### ACCESS Center Call Volume and Responsiveness

DMH reviews aggregate data on the ACCESS Center's call volume and responsiveness annually (Appendix A: 'Calls Answered within 1-minute'). In calendar year (CY) 2019, the ACCESS Center received 143,258 calls. This represents a one (1) percentage point (PP) increase from CY 2018 (N=141,460) and a five (5) PP decline from CY 2017 (N=150,357; Figure 1).

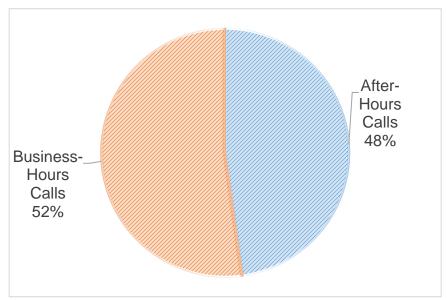
152,000 150,357 150,000 148.000

Figure 1: ACCESS Center Call Volume for Calendar Year 2017 through 2019

Data Source: ACCESS Center data reports, CY 2017 to CY 2019.

A larger number of calls received by ACCESS Center in CY 2019 were handled during after-hours (52.2%, N= 74,802) when compared with business-hours (47.8%, N=68,012; Figure 2).

**Figure 2**: Number of Business Hours versus After-Hours Calls Received by ACCESS Center in Calendar Year 2019



Note: Business-hours are 8:00 AM to 5:00 PM, Monday through Friday, excluding holidays. After-hours are outside of business-hours and include weekends and holidays.

Data Source: Access Center's Calls Answered within 1-minute report, CY 2019.

# ACCESS Center non-English Language Calls

The ACCESS Center tracks the number of calls received in non-English languages (Appendix B: 'Five-Year Trend in non-English Language Calls Received by ACCESS Center'). Over the past five years, the trend indicates that most non-English callers have requested interpreter services in Spanish, followed by Korean, Mandarin, Armenian, Farsi, and Cantonese.

In CY 2019, ACCESS Center staff provided language interpreter services in the Spanish language for 6,398 calls. A Language Interpreter Service Vendor interpreted an additional 1,373 Spanish language calls. Approximately 94% of the non-English calls received by ACCESS Center staff were in Spanish (N=7,771), followed by Korean (N=149) at 1.8%, and Mandarin (N=126) at 1.6%. Two hundred sixty-two calls (N=262) were received in CY 2019 and accounted for 3.2% of all non-English calls.

#### **Annual Test Calls Study**

The DMH Test Calls Study supports the ACCESS Center and the Quality Improvement (QI) unit in their collaborative efforts to improve cultural and linguistic responsiveness, customer service, referrals to SMHS, tracking/monitoring, and adequate documentation of call information. ACCESS Center management and staff collaborate with the QI unit and Service Area Quality Improvement Committee (SA QIC) Chairs/Co-Chairs on this project and the annual summary report.

#### Purpose

The Test Calls Study aims to identify potential areas for quality improvement and strengths in the responsiveness of the ACCESS Center's 24/7 line to Medi-Cal beneficiaries. Moreover, the purpose of the Test Calls Study is to monitor:

- Responsiveness of the 24/7 ACCESS Center Toll-Free Line;
- Knowledge, helpfulness, and cultural sensitivity of the ACCESS Agent;
- Documentation of the call and Test Callers in the ACCESS Center Call Log;
- ACCESS Center's response capability in a non-English language;
- Information provided to Test Callers on how to use the beneficiary problem resolution and fair hearings processes; and
- Verify compliance with regulatory and/or contractual requirements (CCR, title 9, chapter 11, sections 1810.405(d) and 1810.410(e)(1)).

# Methodology

DMH utilizes a "Secret Shopper" approach for the Test Calls project. The consistent methodology allows for reliable conclusions. Test callers rate their experiences, the ACCESS Center Agent, and interpreter services if applicable, using a Test Calls Survey form (CY 2019; Appendices C and D: '24/7 ACCESS Line Test Calls Survey Form for Calendar Year 2019'). In addition to the survey form, QI provides Test Callers with set guidelines/instructions, scenarios (crisis, non-crisis, beneficiary problem/compliant), a call and data submission schedule, and the list of threshold languages by Service Area (SA). SA Chairs/Co-Chairs organize and facilitate 10 Test Calls, one SA per month. The standard is five Test Calls in English and five in non-English (SA's threshold languages). Test calls occur during after-hours (before 8:00 AM or after 5:00 PM on weekdays or anytime during weekends or holidays) and business hours. In CY 2019, QI coordinated the annual Test Calls study between March 1, 2019, and October 31, 2019, which covered one SA each month.

### Summary of Test Calls Study Findings for Calendar Year 2019

## **Completed Test Calls**

The following report summarizes the CY 2019 Test Calls Study's findings. A summary of the completed test calls by SA and the reason for the call is presented in Table 1. Of the 80 Test Calls completed in CY 2019:

- Seventy-percent (N=56) of the Test Callers cited "Mental Health Referral" as their reason for the call, followed by "Crisis" at 21% (N=17), and "Beneficiary Problem/Complaint" at 9% (N=7). About 47.5% (N=38) of the Test Calls occurred during business hours and the remaining 52.5% (N=42) occurred during afterhours.
- Test Callers completed 50.0% (N=41) of their calls in English and 32.5% (N=26) in Spanish.
  - 17.5% of the calls in a non-English language other than Spanish were completed in Armenian (N=2), Cantonese (N=1), Farsi (N=3), Korean (N=2), Mandarin (N=1), Russian (N=1), and Vietnamese (N=3).

**Table 1:** Number of Completed Test Calls by Service Area, Month, and Reason for the Call or Type of Help Requested

Reason/Type of Help Requested  SA Month <sup>1</sup> Mental Beneficiary Health Crisis Problem/ Referral Complaint				SA Totals	
SA 1	October	9	3	1	13
SA 2	September	7	2	1	10
SA 3	August	10	2	1	13
SA 4	July & August	6	2	0	8
SA 5	March & April	6	2	1	9
SA 6	April & May	4	2	1	7
SA 7	May	7	2	1	10
SA 8	June	7	2	1	10
	<b>Grand Totals</b>	56	17	7	80

Note: This table only includes Test Calls considered "completed" for the CY 2019 study. ¹Some SAs completed their Test Calls at the start of the following month. Data Source: Enterprise Feedback Management (EFM) system, CY 2019

### Test Calls Data by Survey Item

DMH relies on the data gathered from the Test Calls Study Survey Form (Table 2) to identify the ACCESS Center's strengths and areas for improvement, namely:

- ACCESS Agent provided their first name;
- ACCESS Agent inquired about emergency or crisis;
- Use of interpreter services;
- Satisfaction with interpreter services;
- Reason for the call or type of help requested;
- Provided with a referral or other information;
- ACCESS Agent provided guidance on the beneficiary grievance form;
- Knowledge and helpfulness of the ACCESS Agent; and
- ACCESS Agent logged the call.

For quality assurance purposes, ACCESS Center records all of their calls. To ensure accuracy and completeness of the study's data, starting April 2019 and when available, ACCESS Center staff reviewed the recordings associated with each of the completed Test Calls. When discrepancies between the recordings and the survey data presented, the ACCESS Center prompted QI to update the report and survey data. QI reflected the revised data in the quarterly 24/7 ACCESS line reports submitted to DHCS.

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Table 2: Test Calls Study Survey Data by Item and Percent (N=80)1

Survey Item	Percent (%)
ACCESS Agent provided their first name to the caller <sup>2</sup>	91%
ACCESS Agent requested the Test Caller's name <sup>3</sup>	78%
Calls in a non-English language	50%
The caller reported satisfaction with interpreter services	85%
ACCESS Agent provided a referral	96%
ACCESS Agent provided guidance on the beneficiary grievance form	70%
ACCESS Agent inquired if the call was for an emergency or crisis <sup>4</sup>	89%
Test Caller reported satisfaction with ACCESS Agent's knowledge and helpfulness	99%
The ACCESS Agent logged Test Call	64%

Note: Data above do not reflect the ¹two (2) calls QI excluded from the study because the callers did not provide their names. ACCESS Center staff verified survey responses by reviewing audio recordings of the Test Calls (when available). Upon audio review, corrections were made to address discrepancies and corrected data was included in the quarterly Test Calls report to DHCS:

Data Source: EFM system, CY 2015 to CY 2019.

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<sup>&</sup>lt;sup>2</sup>Ten (10) responses to the "ACCESS Agent provided their first name to the caller" item were changed from "No" to "Yes;"

<sup>&</sup>lt;sup>3</sup>Six (6) responses to the "ACCESS Agent requested the Test Caller's name" item were changed from "No" to "Yes;" and

<sup>&</sup>lt;sup>4</sup>Seven (7) responses to the "ACCESS Agent inquired if the call was for an emergency or crisis" item were changed from "No" to "Yes."

## Trending of ACCESS Center Test Calls Data

QI evaluated the ACCESS Center's performance on the Test Calls survey items that received a "Yes" or "No" response over five years (Table 3). The percentage of ACCESS Center staff providing their first name to callers increased by 19 PP from 72% in CY 2015 to 91% in CY 2019 (Figure 3). The percentage of ACCESS Center staff requesting the caller's name increased by 10 PP from 68% in CY 2015 to 78% in CY 2019 (Figure 4). Satisfaction with interpreter services declined by 6 PP from 91% in CY 2015 to 85% in CY 2019 (Figure 5). The percentage of ACCESS Center staff providing referrals increased by 3 PP from 93% in CY 2015 to 96% in CY 2019 (Figure 6). The rate of ACCESS Center staff asking callers if the call was an emergency or a crisis increased by 17 PP from 72% in CY 2015 to 89% in CY 2019 (Figure 7). Satisfaction with the ACCESS Center staff's knowledge and helpfulness increased by 22 PP from 77% in CY 2015 to 99% in CY 2019 (Figure 8). The percentage of calls documented/logged by ACCESS Center staff increased by 12 PP from 52% in CY 2015 to 64% in CY 2019. Of note, this is a 4 PP decline from the 68% of calls logged in CY 2018.

Table 3: Five-Year Trend of ACCESS Center Test Calls Data by Item

Survey Item	2015	2016	2017	2018	2019
ACCESS Agent provided their first					
name to the caller	72%	89%	78%	91%	91%
ACCESS Agent requested the Test					
Caller's name	68%	63%	71%	74%	78%
The caller reported satisfaction with					
interpreter services	91%	81%	94%	91%	85%
ACCESS Agent provided a referral	93%	93%	93%	99%	96%
ACCESS Agent inquired if the call					
was for an emergency or crisis	72%	82%	82%	75%	89%
Test Caller reported satisfaction					
with ACCESS Agent's knowledge					
and helpfulness	77%	84%	88%	86%	99%
The ACCESS Agent logged Test Call					
	52%	44%	57%	68%	64%

Figure 3: Five-Year Trend for the "Provided their First Name to the Caller" Item

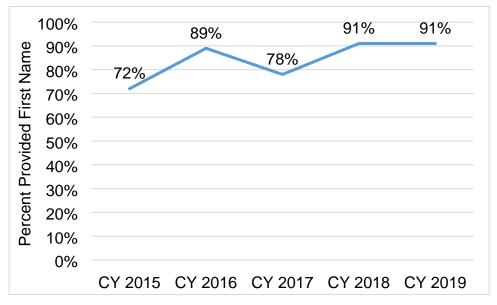
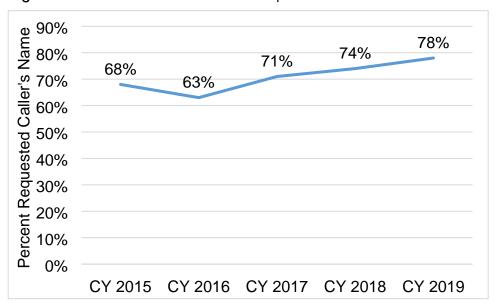


Figure 4: Five-Year Trend for the "Requested the Test Caller's Name" Item



**Figure 5:** Five-Year Trend for the "Reported Satisfaction with Interpreter Services" Item

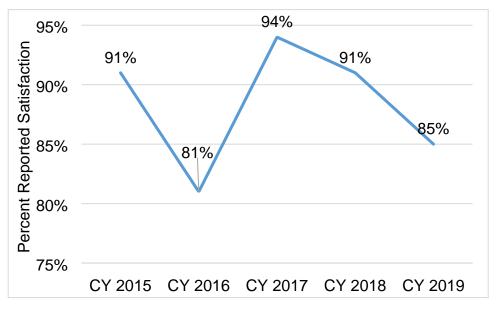


Figure 6: Five-Year Trend for the "Provided a Referral" Item

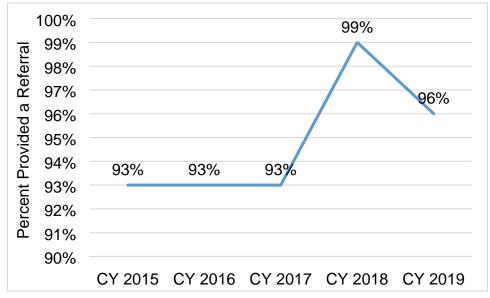
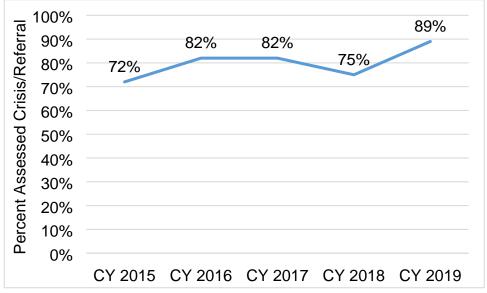
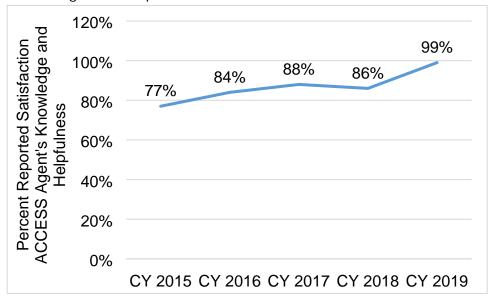


Figure 7: Five-Year Trend for the "Inquired if this was for an Emergency or Crisis" Item



**Figure 8**: Five-Year Trend for the "Reported Satisfaction with ACCESS Agent's Knowledge and Helpfulness" Item



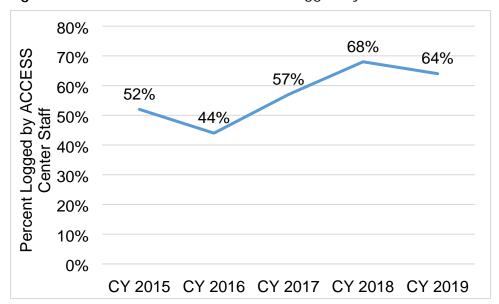


Figure 9: Five-Year Trend in Test Calls Logged by ACCESS Center Staff

### **Summary**

Two survey items demonstrated a decline in performance between CY 2018 and CY 2019. The percentage of ACCESS Center staff providing a referral declined by 3 PP from 99% in CY 2018 to 96% in CY 2019. The rate of Test Calls documented/logged by ACCESS Center staff fell from 68% in CY 2018 to 64% in CY 2019.

In response to the "Did the ACCESS Agent inform you on how to access the beneficiary grievance form" item for beneficiary problem/complaint calls only, 57% (N=4) of the Test Callers reported the ACCESS Agent provided guidance on the beneficiary grievance form. However, 100% of the Test Callers reported the Agent provided a referral or other information on the beneficiary grievance-related calls and reported satisfaction with the Agent's service.

## Availability of ACCESS Center Services in non-English Languages

ACCESS Center staff provided language assistance for 51% of the non-English calls and exclusively in the Spanish language (N=20). The remaining 49% were a mixture of Spanish (N=6) and other non-English languages (N=13) and utilized a Language Interpreter Service Vendor. Tables 4 and 5 below present the reasons for satisfaction/dissatisfaction with language interpreter services by the caller's reason.

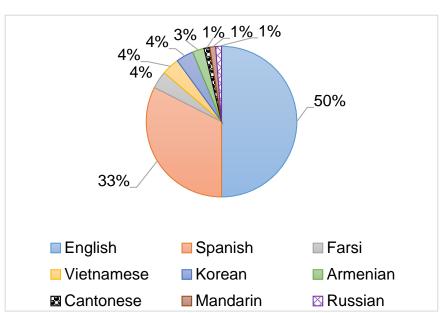


Figure 10: Completed Test Calls by Language

Data Source: EFM system, CY 2019.

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## Satisfaction with Interpreter Services

#### Reasons for Satisfaction

Eighty-seven percent (N=34) of the Test Calls completed in non-English languages endorsed satisfaction with their language interpreter services on their survey form (Table 4). Among the 34 Test Callers who endorsed satisfaction with services, roughly 53% (N=18) received language assistance from an ACCESS Agent and about 47% (N=16) from the Language Interpreter Service Vendor. "Good customer service, "good quality of interpretation," and "I got the help I needed" were among the most frequently selected responses by test callers satisfied with their interpreter services. One test caller noted "Other" as a reason for satisfaction, further indicating "she was empathetic."

**Table 4:** Reasons for Satisfaction with ACCESS Center Services or Language Interpreter Service Vendors among non-English Callers

Reasons for Satisfaction	ACCESS Agent (N=18)		Language Service (N=	Vendor
	Number	Percent	Number	Percent
Good customer service	16	33%	14	29%
Good quality of interpretation	12	24%	12	24%
I got the help I needed	11	22%	13	27%
Short wait time	9	18%	10	20%
Other	1	2%	0	0%

Data Source: EFM system, CY 2019.

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#### Reasons for Dissatisfaction

Six Test Callers, or 15% of the non-English language Test Calls, endorsed dissatisfaction with the interpreter services on their survey form (Table 5). Two of the calls were completed by ACCESS Center Staff in the Spanish language, and the Language Interpreter Service Vendor conducted the remaining four calls in Cantonese (N=1), Farsi (N=2), and Korean (N=1). "Poor quality of interpretation" was the most commonly selected reason for dissatisfaction with the Language Interpreter Service Vendor. "Poor customer service" and "poor quality of interpretation" were chosen as reasons for dissatisfaction with the interpreter services provided by ACCESS Center staff. One Test Caller endorsed an "Other" response for dissatisfaction. According to said Test Caller, "the call was dropped before connection to live agent or interpreter."

**Table 5:** Reasons for Dissatisfaction with ACCESS Center Services or Language Interpreter Service Vendors among non-English Callers

Reasons for Dissatisfaction	ACCESS Agent (N=2)		Language Interpreter Service Vendor (N=4)	
	Number	Percent	Number	Number
Poor customer service	1	50%	1	11%
Poor quality of interpretation	1	50%	3	33%
Did not get the help I needed			1	11%
Long wait time			2	22%
Other			2	22%

Data Source: EFM system, CY 2019.

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#### Satisfaction with ACCESS Center Services

#### Reasons for Satisfaction

Sixty-nine (86%) of the test callers endorsed satisfaction of the ACCESS Agent (Table 6). Approximately 82% of the satisfied callers selected "Good customer service," and 79% selected "I got the help I needed" as reasons for their satisfaction with ACCESS Center staff. Among the satisfied Test Callers, "Other" was the least selected response. This group of callers reported, "agent was personable;" had patience and empathy towards caller;" "provided additional info about what services were at each site including [evidenced based practices] and med support;" and "provide basic info to patient's rights and phone number."

Table 6: Reasons for Satisfaction with ACCESS Center Services

Reason for Satisfaction (N=69)	Number	Percent
Good customer service	55	80%
Was knowledgeable about what I needed	52	75%
I got the help I needed	53	77%
Short wait time	42	61%
Other	8	12%

Data Source: EFM system, CY 2019.

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#### Reasons for Dissatisfaction

Thirteen (16%) of the Test Callers reported dissatisfaction with the ACCESS Agent's knowledge or helpfulness (Table 7). "Other" was the most frequently selected reason for dissatisfaction (69%). Some of the explanations Test Callers provided were:

- "Agent did not ask for her address and did not provide referrals to a nearby urgent care or mental health clinic:"
- "Agent did not ask about the caller's situation [and] did not provide address to referral;" "did not ask if caller needed any other assistance;"
- "was not helpful and sounded annoyed when caller asked for the Agent's name;"
- "did not provide local referrals;"
- "I did not get the help I needed;" and
- "poor customer service."

 Table 7: Reasons for Dissatisfaction with ACCESS Center Services

Reason for Dissatisfaction (N=13)	Number	Percent
Poor customer service	3	23%
Was not knowledgeable about what I needed	1	8%
I did not get the help I needed	4	31%
Long wait time	2	15%
Other	9	69%

Data Source: EFM system, CY 2019.

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#### Implications and Recommendations/Proposed Actions

The QI unit shared the study's findings, including trends data, with the ACCESS Center's Test Calls team. As a result of these findings, the ACCESS Center identified the following process improvement strategies:

- ACCESS Center management will implement staff training, supervisory oversight, and continuous monitoring to ensure quality services and accurate documentation of initial service requests for SMHS.
- ACCESS Center management will work with staff to improve the frequency of providing mental health referrals and documenting calls in the ACCESS Center call log. In CY 2020, ACCESS Center will implement standardized coaching packages for supervisors to review with staff to address specific improvement areas. ACCESS Center will establish an internal Quality Improvement Committee (QIC). The QIC will develop guidelines to monitor Test Calls and Quality Assurance (QA) reviews, including follow-up improvement activities for supervisors implementing coaching packages to their staff.
- ACCESS Center will disseminate a monthly Test Calls Study Bulletin to all ACCESS Center staff. The Program Manager will send the bulletin to all ACCESS Center staff to highlight the State mandates and regulations related to Test Calls. The bulletin will include updates for each month to give the big picture of the Test Calls Study's documentation trends. The bulletin will elevate the Test Calls Study's importance and compliance with the State mandate and attention to the study's findings for the month and the year. While individual staff receive coaching packages from their respective supervisor when documentation is an area for improvement on a specific Test Call, the Test Calls Study Bulletin gives the big picture to staff and the importance of continuous quality improvement in this area.
- Any instances of dissatisfaction with the Language Interpreter Service Vendor will be brought to the Internal Services Department (ISD) contact for immediate attention for follow-up with the vendor.

To improve the efficiency of the study and the accuracy in the responses:

- ACCESS Center and the QI unit will work collaboratively to update the study's methodology and supporting materials based on a review of errors noted by Test Callers on the Test Call Survey form.
- QI and ACCESS will work collaboratively to revise the CY 2020 Test Call Survey form, including removing items as applicable and improving how items are organized. Refer to Appendix E for *Guidelines/Instructions to Reinforce for Test* Callers in CY 2020.
- ACCESS Center staff will work collaboratively with the Chief Information Office Bureau (CIOB) staff providing support and QI to review the Test Calls information for accuracy and completeness.

### **Study Limitations**

- ACCESS Center introduced audio recording reviews in April 2019. These reviews
  were facilitated by ACCESS Center staff due to their proximity and familiarity with
  the audio logs. Outside access to audio logs is not permitted. Due to this limitation,
  audio reviews could not be performed by a party outside of ACCESS Center. This
  internal process should be taken into consideration in the review of the Test Calls
  results.
- Based on the audio recording reviews' findings, ACCESS Center prompted Test Callers to address errors specific to (1) the ACCESS Agent announcing their name, (2) asking the caller for their name and for whom services were requested, (3) interpreter services offered, (4) inquiring if this was a crisis or emergency, and (5) customer service. Corrections were made to address all errors except for items related to customer service where the SA leads asserted value in the Test Callers' initial reactions. The QI Unit attempted to capture the revisions made but did not have a well-established post-survey tracking log.
- The QI Unit welcomed volunteer Test Callers regardless of their familiarity with the 24/7 ACCESS Center hotline or Test Calls' Study. Despite the QI Unit's efforts to facilitate training in each SA and offer technical support, managing the varying levels of understanding was challenging and resulted in re-occurring errors (i.e., incorrect date/time stamps, inaccuracies in the ACCESS Agent's name, incomplete names for the person requesting services, missing responses, or inconsistent responses to the customer service items).

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### Plans for Monitoring ACCESS Center Responsiveness in CY 2020

- QI will instruct each SA to complete eight Test Calls during their assigned study period (Table 8) according to the following:
  - o Language
    - Four in English and four in SA threshold languages (Table 9)
  - o Time of Day
    - Four during business hours and four after hours
  - o Type of Call
    - One crisis scenario call during business hours and one crisis scenario during after hours
    - One beneficiary problem resolution/complaint call
    - Five mental health referral calls

Table 8: Service Area Test Calls' Schedule for CY 2020

SA	Assigned Study Period	Submission Deadline
SA 8	March 2020	April 10, 2020
SA 7	April 2020	May 11, 2020
SA 6	May 2020	June 10, 2020
SA 5	June 2020	July 10, 2020
SA 1	July 2020	August 10, 2020
SA 2	August 2020	September 10, 2020
SA 3	September 2020	October 13, 2020
SA 4	October 2020	November 10, 2020

Table 9: Threshold Languages by Service Area

SA	Threshold Language(s)
SA 1	Spanish
SA 2	Armenian, Farsi, Korean, Russian, Spanish, Tagalog, and Vietnamese
SA 3	Cantonese, Korean, Mandarin, Spanish, and Vietnamese
SA 4	Armenian, Korean, Russian, Spanish, and Tagalog
SA 5	Farsi and Spanish
SA 6	Spanish
SA 7	Korean and Spanish
SA 8	Cambodian, Korean, Spanish, and Vietnamese

# **Appendices**

**Appendix A:** Calls Answered Within 1 Minute by Number and Percent for Calendar Year 2019

Month	Total Calls by Shift	Calls Answered Within 1 Minute by Shift	Percentage of Calls Answered Within 1 Minute
January <sup>1, 2, 3</sup>			
Business-Hours	5,273	3,936	75%
After-Hours	6,037	5,219	86%
February			
Business-Hours	5,417	4,314	80%
After-Hours	5,700	4,986	87%
March <sup>1, 2, 3, 4</sup>			
Business-Hours	5,918	4,354	74%
After-Hours	7,037	5,184	74%
April <sup>3</sup>			
Business-Hours	5,624	4,234	75%
After-Hours	5,769	4,536	79%
May			
Business-Hours	5,819	4,701	81%
After-Hours	5,738	4,852	85%
June <sup>5</sup>			
Business-Hours	5,032	4,497	89%
After-Hours	6,232	5,213	84%
July			
Business-Hours	5,849	5,541	95%
After-Hours	6,014	4,921	82%
August			
Business-Hours	6,007	5,579	93%
After-Hours	6,340	5,103	80%
September			
Business-Hours	6,179	5,563	90%
After-Hours	6,924	5,536	80%
October <sup>3, 4</sup>	0.500	5.704	000/
Business-Hours	6,532	5,761	88%
After-Hours	6,919	5,397	78%
November	F 475	4.000	0504
Business-Hours	5,175	4,902	95%
After-Hours	6,735	5,898	88%
December	F 005	4.704	0404
Business-Hours	5,205	4,721	91%
After-Hours Year-to-Date	5,783	4,953	86%
Year-to-Date  Business-Hours	60.000	E0 400	OF0/
	68,030	58,103	85%
After-Hours	74,802	61,798	82%
Total (Overall)	143,258	119,901	84%

<sup>1</sup>VCC experienced maintenance/issues on January 19 from 11:00 PM to January 20 at 3:00 PM; January 21 from 2:00 AM to 3:30 AM; January 25 from 2:00 AM to 3:00 AM; March 5 from 5:10 PM to 7:50 PM; and July 13 from 8:30 AM to 9:00 PM. <sup>2</sup>IBHIS experienced maintenance/issues on January 29 from 2:30 PM to January 29 at 3:30 PM; March 5 from 5:10 PM to 5:15 AM; and March 8 from 2:00 AM to 4:30 AM. <sup>3</sup>Staffing issues occurred causing higher rates of absenteeism, tardiness, and staff turnover. <sup>4</sup>An increase in call volume may have contributed to decline in answered calls within one minute. <sup>5</sup>Business-hours skill set proficiencies were changed on June 24, 2019. Agents assigned to answer informational and referral calls are now backed up by agents assigned to answer calls, and vice versa. This has led to a decrease in queue lengths and answer times. Data Source: DMH ACCESS Center, CY 2019.

**Appendix B**: Five-Year Trend in non-English Language Calls Received by ACCESS Center

Longuego			CY		
Language	2015	2016	2017	2018	2019
Albanian	0	0	0	0	1
Amharic	0	0	1	0	2
Arabic	6	16	8	18	21
Armenian	80	130	128	65	32
Bahasa	0	1	0	0	0
Bengali	0	1	0	2	5
Burmese	0	0	0	2	2
Cambodian	0	7	10	26	19
Cantonese	46	40	46	73	59
Farsi	58	56	178	59	40
French	2	2	1	1	1
German	1	0	0	0	0
Greek	1	0	0	0	0
Hebrew	1	0	0	0	0
Hindi	0	0	0	1	1
Hmong	0	0	0	0	1
Hungarian	3	0	0	0	0
Japanese	2	4	2	6	6
Khmer	3	1	0	0	0
Korean	108	116	140	224	149
Luganda	0	0	0	1	0
Mandarin	62	86	82	166	126
Persian	0	1	5	4	3
Polish	0	1	1	1	1
Portuguese Punjabi	1	0	2	1	1
Romanian	0	1	0	0	0
Russian	12	16	37	13	25
Serbian	0	2	0	0	0
Slovak	0	1	0	0	0
*Spanish (LISMA)	1,089	1,474	2,303	1,370	1,373
**Spanish ACCESS	1,009	1,474	2,303	1,570	1,575
Center	6,159	6,040	6,150	6,612	6,398
Spanish Subtotal	7,248	7,514	8,453	7,982	7,771
Tagalog	7,240	10	9	16	10
Thai	1	0	7	0	5
Urdu	0	0	0	1	1
Vietnamese	17	28	195	34	26
Total	7,659	8,035	9,305	8,697	8,308
	. ,556	0,000	0,000	0,007	5,555

Note:\* Effective 10/13/2016 at 12:01 AM, the new Language Interpretation Services Master Agreement (LISMA) is provided by the following: Language Line Services Inc, TransPerfect Translations International, Inc, and Worldwide Interpreters, Inc. \*\*ACCESS Center Spanish speaking employee assisted with interpreter services. Data

Source: Virtual Contact Center (VCC) effective 11/29/2013; DMH ACCESS Center, CY 2015 to CY 2019.

Appendix C: 24/7 ACCESS Line Test Calls Survey Form for Calendar Year 2019 (Front)

## LACDMH OFFICE OF ADMINISTRATIVE OPERATIONS – QUALITY IMPROVEMENT DIVISION 24/7 ACCESS LINE TEST CALLS SURVEY FORM – CY 2019

ACCESS PHONE (800) 854-7771

# Please Complete One Survey Form per Test Call

Call start	t time: hr:Opm		MM DD	/ YYYY 5 6 7 8			
Call end	time: hr:min:Oam	S	ERVICE ARE	A (choose one)			
1)	Did the ACCESS Agent provide their name?	YES	NO				
2)	If not provided, test caller must ask for the first nan	ne of the	ACCESS Ager	nt.			
	What was the first name of the ACCESS Agent?						
	Did the ACCESS Agent ask for your name?	YES	NO				
	Please enter the name used in the Test Call even if the ACCESS Agent did not ask for your name.  NAME you used in the Test Call: First: Last:						
	If you called for services regarding someone other than	yourself,	please provide	the name used:			
	First: Last:						
3)	Did the ACCESS Agent inquire if the situation is an em	ergency o	r crisis? YES	NO			
4)	LANGUAGE you USED IN the Test Call: English Spanish						
5)	IF NOT ENGLISH or SPANISH, what specific language did you use for the test call?						
6)	For non-English calls, were Interpreter Services provide	ed?	YES	NO			
If Interpreter Services were used, who provided your Interpreter Services ( <u>please check one from the following</u> )?  a. ACCESS Agent b. Language Line							
	If Interpreter Services were provided, were you satisfied If YES, please check all reasons that apply: a. Good customer service b. Good quality of interpretation c. I got the help I needed d. Short wait time to connect to an Interprete e. Other		rpreter Service	s? YES NO			
			REV 2/25	V19			

# Appendix D: 24/7 ACCESS Line Test Calls Survey Form for Calendar Year 2019 (Back)

If NO, please check all reasons that apply: a. Poor customer service b. Poor quality of interpretation c. Did not get the help I needed d. Long wait time to connect to an Interpretation e. Other	eter				
7) Reason for the call or type of help requested? Che a. Mental Health Referral b. Complaint/Beneficiary Problem c. Crisis Scenario	ck all that apply				
8) Were you provided with a referral or other information	on? YES NO				
If YES, list here: (Clinic Name and Phone Number of	or Patients' Rights Office information)				
<ol> <li>If this call was for a beneficiary problem/complaint, access the beneficiary grievance form?</li> </ol> YES					
10)Were you satisfied with the knowledge and helpfuln If YES, please check all reasons that apply:  a. Good customer service  b. Was knowledgeable about what I needed c. I got the help I needed d. Short wait time  e. Other					
If NO, please check all reasons that apply:					
a. Poor customer service b. Was knowledgeable about what I needed c. Did not get the help I needed d. Long wait time e. Other					
Thank you for your participation. Please double ch	eck that your form is filled in completely				
before submitting it to your SA QIC Chair/Co-Chair.					
This section to be completed by Quality Improvement or the Chief Information Office Bureau (CIOB): WAS THE CALL LOGGED BY THE ACCESS CENTER AGENT (name, date, and disposition)?					
Name: YES	NO				
Date: YES Disposition: YES					
	REV 2/25/19				

#### **Appendix E:** Guidelines/Instructions to Reinforce for Test Callers in CY 2020

The Quality Improvement (QI) Unit will update the CY 2020 Test Calls' Study materials and training to include the following guidelines/instructions:

- The CY 2020 version of the Test Calls survey form should be on-hand for the call.
   Note the correct date and start and stop times on the form.
- Before making the call, identify a first and last name, social security number, phone number, date of birth, address/city/neighborhood within the designated SA, and a 14 digit Medi-Cal beneficiary number if the ACCESS Agent asks.
- Do not identify yourself as a Test Caller or refer to a "Service Area."
- The first two items of the survey should be completed at the top of the call. The ACCESS Agent will provide their name at the beginning of the greeting and ask if the call is regarding a crisis or emergency.
- ACCESS Center will share the greeting format/narrative DMH expects of all ACCESS Agents, per the ACCESS protocols and standards, with Test Callers. Test Callers can expect the Agent to announce the name and ask the pertinent questions.
- The question related to the caller's name versus for whom services are requested will be revised to simplify this and only include the name for whom services are requested
- QI will revise the section on satisfaction with the ACCESS Agent to reflect the satisfaction ratings for ACCESS Center services in general and include the wait time as a different item. Wait time is a systems related issue and not contingent upon the Agent's response on the specific test call and warrants this be evaluated separately
- Per the stakeholders' recommendation at the QIC meeting, wait time frame options will be listed for test callers to check to focus on objective data rather than a subjective perception of satisfaction on the wait time
- Reason for the call or type of help requested The survey will be revised to change "Check all that apply" to Check only one option – check the type of scenario used for this call
- Do not request or accept an electronic referral to the clinic or tie up the line by placing the ACCESS Agent on hold. Keep the call to less than 10 minutes.
- Notify QI as soon as possible if you experience any issues with language interpreter services.
- Record the person's first and last name for whom services were requested so the call can be located in the ACCESS Center call log.
- Complete the survey form in its entirety and provide a brief explanation when "Other" is selected.